	PATENT	APPLICATION Effective	ORD		10-0	വാ	. 01	1					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
TO	TAL CLAIMS		24				ľ –	RATE	FEE	1 1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		 	SIC FEE		1	BASIC FEE		
							. F		363.00	OR		770.00	
TOTAL CHARGEABLE CLAIMS			24 minus 20=		-4		1	X\$ 9=	·	OR	X\$18=	72	
INDEPENDENT CLAIMS			1 1	inus 3 =	0			X43=		ОЯ	X86≖	·	
MIL	LTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		ОЯ	+290=		
* If the difference in column 1 is less than zero, enter *0" in column 2						column 2	T	OTAL		OR	TOTAL	842	
CLAIMS AS AMENDED - PART II OTHER THAN (1/17/05 (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST ER USLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	24	Minus	. 2	4		×	C\$ 9=		OR	X\$18=		
A	Independent	• /	Miņus	05110515	<u> </u>	-	- x	(43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								145=		OR	+290=		
- A ×/								ADDIT FEE OR ADDIT FEE					
2	-23-06	(Column 1)		(Colum	in 2)	(Column 3)		41. FEE		•	WOII. FEE		
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO	ER USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	.24	Minus	- 24		. 0	×	\$9=		OR	X\$18=		
A	Independent • / Minus ••• 3 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA			CLAIM	· 8.	×	43=		OR	X86=	V		
THO PRESENTATION OF MUETIFEE DEPENDENT COMM.										OR	+290=	Λ .	
								TOTAL T. FEE		OR,	TOTAL DOTT, FEE	7. V	
		(Column 1)	· · · · · · · · · · · · · · · · · · ·	(Colum		(Column 3)			••				
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT	•	HIGHE NUMBI PREVIOU PAID FI	er . Isly	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	44			\ \mathref{v}_1	9=			X\$18=	_FEE_	
	Independent	•	Minus				-			OR			
۲ ا	FIRST PRESE	ESENTATION OF MULTIPLE DEPENDE			CLAIM			13=		OR	X86=		
			•				+1	45=	·]	OR	+290=	. !	
(I	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. I ADDIT. I 									DR .	TOTAL	•	
-	the Highest Nu	mber Previously Pa ber Previously Pak	d For IN THE	S SPACE &	ess that	2 anter "1"	-			_	DOM. FEEL ma 1.		

Application or Docket Number